Effective December 29, 1999													
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL TYPE		OR	OTHER	
FOR			NUMBER FILED		NUMBER EXTRA		RATE	FEE.		RATE	FEE		
BASIC FEE										345.00	OR		690.00
TOTAL CLAIMS			9	minus 2		•			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	2 minus 3 =			•			X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL		OR	TOTAL	690
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL	ENTITY	•	OTHER	THÀN
ENT A		REM A	AIMS IAINING FTER NOMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		FLATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	9	Minus		20	=		X\$ 9=		OR	X\$18+	
	Independent	٠	>	Minus	••		=		X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										•	OR	+260=	
; •												TOTAL	-
(Column 1) (Column 2) (Column 3)									ADOIT. FEE		ΪÀ	ADDIT, FEE	
AMENDMENT B		REN	AIMS AAINING FTER NOMENT			HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE
Ž	Total ·		7	Minus	••	20	=		X\$ 9=		OR	X\$18 -	
E E	Independent	• 6	2_	Minus	<u></u>	\sim	=		X39=		OR	X78=	
	FIRST PRESE	NTATIO	ON OF MI	JLTIPLE DEF	PEN	DENT CLAIM			+130=		OR	+260=	
1	4-18-05										OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		REM	LAINING FTER NOMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE
2	Total	•	9	Minus	••	20	3		X\$ 9= ·		OR	X\$18=	
AME	Independent		2	Minus	•••		. 7		X39=		OR	X78=	•
	FIRST PRESE	ON OF MI	JUTIPLE DEF	 	.100								
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3, " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									+130= TOTAL		OR	+260=	
·	the "Highest Nur The "Highest Num he "Highest Num	mber Pr	eviously Pa	iid For IN THI	S 5P	ACE is less the	in 3. enter "3."		ODIT. FEE	moriala ha	OR in col	ADDIT. FEE	
	PTO-675					F 001						ARTMENT OF	

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